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## REPORT OF RECEIPTS AND DISBURSEMENTS

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**FEC FORM 3** 

(Revised 02/2003)

(1)

FORM 3	For An Authorized Committee			e Use Only	
NAME OF     COMMITTEE (in full)	TYPE OR PRINT		ample: If typing, type er the lines.	12FE4M5	*
Crow For	NIS SIGNA	te,,,	<u> </u>	<u> </u>	
	, , , , , <u>, , , , , , , , , , , , , , </u>		<u> </u>	<u> </u>	
ADDRESS (number and st	reet) PO BOD	KI 18125			
Check if different than previously reported. (ACC)	rhiak	asha		OK 17.3	023-0825
2. <b>FEC IDENTIFICAT</b>	ION NUMBER ▼	CITY A		STATE A	ZIP CODE
C4.6.4.9.	9.5.6.8 3	3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT
	ts: arterly Report (Q1)	(b) 12-Day <b>PRE</b>	-Election Report for th Primary (12P) Convention (12C)	General (12G) Special (12S)	Runoff (12R)
(m)	Quarterly Report (Q2)	Election on	T6 24	12014	in the State of
January 31	Year-End Report (YE)	(c) 30-Day <b>POS</b>	T-Election Report for General (30G)	the: Runoff (30R)	Special (30S)
Termination	Report (TER)	Election on	M M / D D	/ <del>Y • Y • Y • Y</del>	in the State of
5. Covering Period	<u>64</u> 61 1	2014	through	1 64 a	<u>ŏ.ĭ.¥</u>
I certify that I have exam	nined this Report and to t	he best of my kr	nowledge and belief it	is true, correct and com	aplete.
Type or Print Name of Ti	reasurer Jimmi	e Krei	zenbeck		
Signature of Treasurer	Jamme .	Kreizen	beck	Date Öb	21 2614
NOTE: Submission of false	e, erroneous, or incomplete	information may	subject the person sign	ing this Report to the per	nalties of 2 U.S.C. §437g.